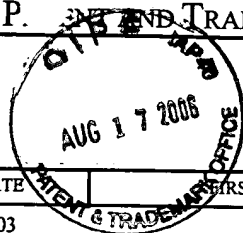




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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/615,383	07/09/2003	Timothy J. Foster	P06335US03/BAS	5842
881	7590	06/23/2006	EXAMINER	
STITES & HARBISON PLLC 1199 NORTH FAIRFAX STREET SUITE 900 ALEXANDRIA, VA 22314			MCGARRY, SEAN	
			ART UNIT	PAPER NUMBER
			1635	

DATE MAILED: 06/23/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

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Box Sea**TRANSMITTAL FORM**

(for all correspondence after initial filing)

TRANSMITTAL FORM (for all correspondence after initial filing)	Application #	10/615,383
	Confirmation #	5842
	Filing Date	09 July 2003
	First Inventor	FOSTER et al
	Art Unit	1635
	Examiner	McGarry, Sean
Total number of pages in this submission =	Docket #	P06335US03/BAS

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fees calculated below <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> including Attachment(s) <input type="checkbox"/> After Final Amendment/Reply <input type="checkbox"/> including Attachment(s) <input checked="" type="checkbox"/> Extension of Time Petition <input checked="" type="checkbox"/> Preliminary Amendment and Response with regard to Sequence Listing	<input type="checkbox"/> Response to Missing Parts/Incomplete Appl. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Copy of Notice <input checked="" type="checkbox"/> Sequence Listing and Diskette
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FEES CALCULATION: For claims if required and/or other fees as shown below:

	NOW	Previously Paid For	Present Extra	Rate	\$
<input type="checkbox"/> TOTAL CLAIMS		- 20		X \$ 50 =	
<input type="checkbox"/> INDEPENDENT CLAIMS		- 3		X \$ 200 =	
TOTAL OF ABOVE CLAIMS FEES =					
<input type="checkbox"/> Reduction by ½ for small entity status of applicant					
SUBTOTAL =					
<input checked="" type="checkbox"/> Fee for extension of time (per attached Petition)					120
<input type="checkbox"/> Other fee for					
TOTAL OF ALL FEES =					120

☒ A CREDIT CARD PAYMENT FORM (PTO-2038) in the amount of \$120 is enclosed.

- ☒ The Director is authorized to charge any fee, additional fee or extension fee due in connection herewith to Deposit Account No. 12-0555:
- (1) if no payment or an insufficient payment is enclosed and a fee is due in connection herewith; or
 - (2) if no petition for extension of time is enclosed but an EOT is required - and in this event, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely.

Date: August 17, 2006

By: B. Aaron Schulman
Registration No.: 31,877

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